

APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?: No

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: LPAAT-BETA INHIBITORS AND USES
THEREOF

Attorney Docket Number:: 200144.405D1

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 21

Small Entity?: Yes

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Robert
Middle Name::	E
Family Name::	Finney
Name Suffix::	
City of Residence::	Shoreline
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	16847 1st Avenue NW
City of mailing address::	Shoreline
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98177

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Lynn
Middle Name::	
Family Name::	Bonham
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	201 Galer Street #270
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98109

Third Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Baoqing
Middle Name::	
Family Name::	Gong
Name Suffix::	
City of Residence::	Shoreline
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	2324 N 178th Street
City of mailing address::	Shoreline
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98133

F urther Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	M
Family Name::	Hollenback
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	911 NW 60th Street
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98107

Fifth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	J
Middle Name::	Peter
Family Name::	Klein
Name Suffix::	
City of Residence::	Vashon
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	18822 Ridge Road SW
City of mailing address::	Vashon
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98070

Sixth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	W
Family Name::	Leung
Name Suffix::	
City of Residence::	Mercer Island
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	7625 Mercer Way
City of mailing address::	Mercer Island
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98040

Seventh Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Scott
Middle Name::	A
Family Name::	Shaffer
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	6815 21st Avenue NE
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98115

Eighth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Norina
Middle Name::	M
Family Name::	Tang
Name Suffix::	
City of Residence::	Ann Arbor
State or Province of Residence::	MI
Country of Residence::	US
Street of mailing address::	2096 Greenview
City of mailing address::	Ann Arbor
State or Province of mailing address::	MI
Country of mailing address::	US
Postal or Zip Code of mailing address::	48103

Ninth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	John
Middle Name::	
Family Name::	Tulinsky
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	15 Aloha Street, Apartment 6
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98109

Tenth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Thayer
Middle Name::	H
Family Name::	White
Name Suffix::	
City of Residence::	Bellevue
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	8651 NE 17th Street
City of mailing address::	Bellevue
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98004

Correspondence Information

Correspondence Customer Number :: **00500**
 Phone number:: 206.622.4900
 Fax Number: 206.682.6032
 E-Mail address:: richards@seedlaw.com or
rsharkey@seedlaw.com

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional	10/236,084	09/06/02
10/236,084	Continuation	09/984,888	10/31/01
09/984,888	An Application claiming the benefit under 35 U.S.C. 119(e)	60/244,195	10/31/00

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Cell Therapeutics, Inc.
Street of mailing address::	501 Elliott Avenue W, Suite 400
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98119

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